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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number	10/811839
Filing Date	30-Mar-2004
First Named Inventor	Theoharis C. THEOHARIDES
Art Unit	
Examiner Name	
Attorney Docket Number	2003133.125US11

I hereby revoke all previous powers of attorney given in the above-identified application.									
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Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)									
SIGNATURE of Applicant or Assignee of Record									
Signature									
Name	Theo	Theoharis C. THEOHARIDES							
Date		9/1/08				617-23	2-1332	1337-	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.									
*Total of1 forms are submitted.									